

2018 JUN 19 PM 1:57

FEC
FORM 1

STATEMENT OF
ORGANIZATION

Office Use Only

1. NAME OF
COMMITTEE (in full)

☐ (Check if name is
changed)

Example: If typing, type
over the lines.

12FE4M5

Leahy for US Senator Committee

ADDRESS (number and street) PO Box 1042

☐ (Check if address is
changed)

Montpelier
CITY

VT
STATE

05601
ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

☐ (Check if address is
changed)

carolyn@leahyforvermont.com

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is
changed)

www.leahyforvermont.com

2. DATE

06/13/2018

3. FEC IDENTIFICATION NUMBER

C C00068353

4. IS THIS STATEMENT

☐ NEW (N)

OR

☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

DiPalma, Robert, , ,

Signature of Treasurer

Robert S. DiPalma

Date

6/14/18

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 06/2012)

201806190200437017

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) ☒ This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) ☐ This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of
Candidate

Leahy, Patrick, J., ,

Candidate
Party Affiliation

DEM

Office
Sought

☐ House

☒ Senate

☐ President

State

VT

District

- (c) ☐ This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of
Candidate

Party Committee:

- (d) ☐ This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) ☐ This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
- ☐ Corporation ☐ Corporation w/o Capital Stock ☐ Labor Organization
- ☐ Membership Organization ☐ Trade Association ☐ Cooperative
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- (f) ☐ This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e. nonconnected committee)
- ☐ In addition, this committee is a Lobbyist/Registrant PAC.
- ☐ In addition, this committee is a Leadership PAC. Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) ☐ This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____	FEC ID Number	C <input type="text"/>
2. _____	FEC ID Number	C <input type="text"/>
3. _____	FEC ID Number	C <input type="text"/>
4. _____	FEC ID Number	C <input type="text"/>

201806190200437018

Write or Type Committee Name

Leahy for US Senator Committee

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Leahy Green Mountain Committee

Mailing Address 918 PENNSYLVANIA AVE SE

Washington

CITY

DC

STATE

20003

ZIP CODE

Relationship:

☐

Connected Organization

☐

Affiliated Committee

☒

Joint Fundraising Representative

☐

Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name Dwyer, Carolyn, , ,

Mailing Address 18 Laurel Drive

Essex Junction

CITY

VT

STATE

05452

ZIP CODE

Title or Position

Manager

Telephone Number (802) 857-5530

8. Treasurer: List the name, address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name DiPalma, Robert, , ,

Mailing Address 288 Maple Street

Burlington

CITY

VT

STATE

05401

ZIP CODE

Title or Position

Treasurer

Telephone Number (802) 658-2311

201806190200437019

Full Name of Designated Agent Dwyer, Carolyn, , ,

Mailing Address PO Box 1042

Montpelier
CITY

VT
STATE

05601
ZIP CODE

Title or Position

Manager

Telephone Number (802) 857-5530

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Community Bank

Mailing Address 172 College St

Burlington
CITY

VT
STATE

05401
ZIP CODE

Name of Bank, Depository, etc.

PNC Bank

Mailing Address 650 Pennsylvania Ave SE

Washington
CITY

DC
STATE

20003
ZIP CODE

201806190200437020

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Morgan Stanley

Mailing Address 105 West View Road

Colchester

CITY

VT

STATE

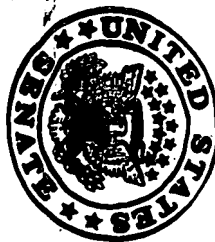
05446

ZIP CODE

201806190200437021



FROM:



United States Senate
Post Office

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FOR
INSPECTION

US POSTAGE AND FEES PAID
PRIORITY MAIL
Jun 14 2018
Mailed from ZIP 05462
PM Flat Rate Box

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PRIORITY MAIL 2 - DAY

Carolyn Dwyer
18 Laurel Dr
Essex Junction VT 05462

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Senate Post Office
JUN 18 2018

SHIP TO:

Office of Public Records
Secretary of the Senate
PO BOX 77678
WASHINGTON DC 20013 - 8561

United States Senate
Post Office



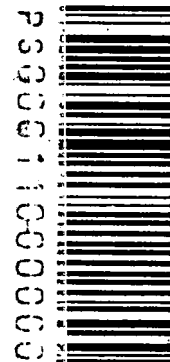
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Senate Post Office
JUN 18 2018

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United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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Date of Receipt Postmark

USPS REGISTERED/CERTIFIED _____
Postmark
USPS PRIORITY MAIL _____
Postmark **6-14-18**

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☒

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER **DM** DATE PREPARED **6-19-18**

4/04/16

201806190200437023



SEN PATCH



SEN PATCH

201806190200437024